

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Edna Durant  
3645 Brooks Ave.  
Canti. CA. 95207

COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Edna Durant* ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

Edna Durant 10-703

D. Is delivery address different from item 1? ☐ Yes ☐ No  
If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label)

7002 0860 0006 5229 4414

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-0835

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-16

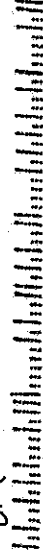
• Sender: Please print your name, address, and ZIP+4 in this box •

OFFICE OF THE CLERK  
UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF OHIO  
100 E. FIFTH STREET, RM #324  
CINCINNATI, OHIO 45202  
OFFICIAL BUSINESS  
PENALTY FOR PRIVATE USE \$300

1'02CV 419

#36437 8m

5202+3305



THURSDAY  
MARSHALS SERVICE